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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 59486.000002
<div style="display: flex; justify-content: space-between;"> <div style="width: 35%;"> <p style="text-align: center;"><b>CERTIFICATE OF MAILING OR TRANSMISSION</b> [37 CFR 1.8(a)]</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300, on November 30, 2006.</p> <p>Signature: <u>Annie A. Cave</u></p> <p>Name: <u>Annie A. Cave</u></p> </div> <div style="width: 65%;"> <p>In re Application of Bengt Krister OLSON</p> <hr/> <p>Application Number 09/853,635      Filed 04-14-2001</p> <p>For COMBINED MARINE AND PLANT EXTRACT COMPOSITIONS</p> <hr/> <p>Group Art Unit 1655      Examiner SRIVASTAVA, KAILASH C., Ph.D.</p> </div> </div>		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</p> <p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)</p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)</p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)</p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)</p> <p><input type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-2478</u>. I have enclosed a duplicate copy of this sheet.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number of acting under 37 CFR 1.34(a) _____</p> </div> <div style="width: 25%; text-align: right;"> <p>\$ <u>120.00</u></p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> <p>\$ _____</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u><i>Stanislaus Aksman</i></u>      November 30, 2006</p> <p>Signature      Date</p> <p><u>Stanislaus Aksman, Reg. No. 28,562</u>      <u>(703) 677-3003</u></p> <p>Typed or printed name      Telephone Number</p> </div> <div style="width: 50%; border-left: 1px solid black; padding-left: 10px;"> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p> </div> </div>		

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Signature: <u><i>Adria A. Cave</i></u> Name: <u>Adria A. Cave</u>		In re Application of Bengt Krister OLSON Application Number 09/853,635 Filed 04-14-2001 For COMBINED MARINE AND PLANT EXTRACT COMPOSITIONS Group Art Unit 1655 Examiner SRIVASTAVA, KAILASH C., Ph.D.
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<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____	
<input type="checkbox"/> Applicant claims small entity status.		
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<u><i>Stanislav Aksman</i></u> Signature		<u>November 30, 2006</u> Date
<u>Stanislav Aksman, Reg. No. 28,562</u> Typed or printed name		<u>(703) 677-3003</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
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